		Docket Number (Optional)				
PETITION FOR EXTENSION OF TIME UND		741124-63				
CERTIFICATE OF MAILING OR	In re Application of					
TRANSMISSION [37 CFR 1.8(a)]	Dieter BUSCH Application Number: 09/729,422 Filed: December 5, 2000					
I hereby certify that this correspondence is being	For: ERGONOMIC, INTERFERENCE SIGNAL-REDUCING POSITION					
deposited with the United States Postal Service with sufficient postage for first class mail in an envelope	MEASUREMENT PROBE FOR MUTUAL ALIGNMENT OF BODIES					
addressed to Mail Stop AFt. Commissioner for	Group Art Unit: 2859	Examiner: T.M. Reis				
1450, or being facsimile transmitted to the USPTO at 703-872-9306, on January 27, 2005	Gloup Aut Glass 2009					
Signatur Sathlunth McKane	, i					
Name: Kathicen M. McManus						
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and appropriation (check time period desired):	ate entity fee are as follows					
One month (37 CFR 1.1	One month (37 CFR 1.17(a)(1)) - (\$60/\$120)					
Two months (37 CFR 1.	Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)					
☐ Three months (37 CFR	1.17(a)(3)) - (\$510/\$1020)	\$				
☐ Four months (37 CFR 1.	☐ Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)					
☐ Five months (37 CFR 1.	☐ Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$					
Applicant claims small entity star	tus.					
☐ A check to cover the fee is enclosed.	sed.	.				
Payment by credit card. Form P	ro-2038 is attached.	•				
The Commissioner has already been authorized to charge fees in this application to a Deposit Account.						
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380(741124-63) I have enclosed a duplicate copy of this sheet.						
I am the applicant/inventor						
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
attorney or agent of rec	ord.					
Registration number	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
Da-St Dive	Janua	ary 27, 2005 Date				
Signature						
David S. Typed or printed	<u> </u>	Telephone Number				
7,640 0 1						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of forms are submitted.						

SENU TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

		Dealer Number (Ortional)						
PETITION FOR EXTENSION OF TIME UND	Docket Number (Optional) 741124-63							
CERTIFICATE OF MAILING OR TRANSMISSION	In re Application of Dieter BUSCH							
[37 CFR 1.8(a)]	Application Number: 09/729,422 Filed: December 5, 200							
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope	For: ERGONOMIC, INTERFERENCE S							
	MEASUREMENT PROBE FOR MUTUAL ALIGNMENT OF BODIES							
addressed to Mail Stop AFt, Commissioner for								
Patents, P.O. Box 1450, Alexandria, Virginia 22313- 1450, or being facsimile transmitted to the USPTO	Group Art Unit: 2859	Examiner: T.M. Reis						
at 703-872-9306 on January 27, 2005								
Signatu Halkler H. The Transas								
Name: Kathleen M. McManus								
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.								
The requested extension and appropriate entity fee are as follows								
(check time period desired):								
One month (37 CFR 1.17	\$ \$225.00							
Two months (37 CFR 1.	E Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)							
☐ Three months (37 CFR 1	\$							
☐ Four months (37 CFR 1.	Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)							
☐ Five months (37 CFR 1.	Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)							
Applicant claims small entity stat	us.							
A check to cover the fee is enclose	ed.							
Payment by credit card. Form Pl	O-2038 is attached.	e e e						
The Commissioner has already been authorized to charge fees in this application to a Deposit Account.								
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380(741124-63) I have enclosed a duplicate copy of this sheet.								
I am the ☐ applicant/inventor								
assignee of record of the Statement under 37	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).							
attorney or agent of reco	rd.							
	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
included on this form. Provide	credit card information and author	rization on FTU-2038.						
1 Vand (). W	Janua	ry 27, 2005						
Signature		Date						
David S. S	afran 703-8	327-8094						
Typed or printed n		Telephone Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
Total of forms are submitted.								

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W312565.1

FEE TRANSMITTAL FOR FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. Sec 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$225.00

Complete if Known					
Application Number	09/729,422				
Filing Date	December 5, 2000				
First Named Inventor	Dieter BUSCH				
Examiner Name	T.M. Reis				
Art Unit	2859				
Attorney Docket No.	741124-63				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check Credit Card Money Other None		3. ADDITIONAL FEES					
Order Deposit Account:		Entity	L	Entity	To Do Andrea		
Deposit Account 19-2380(741124-63)		Fee (\$)	Fee Code	Fee (S)	Fee Description		
Account 19-2380(741124-03)		130	2051	65	Surcharge - late filing fee or oath		
	1052	50	2052	25	Surcharge - late provisional filing fee or cover		
	1053	130	1053	130	Sheet Non-English specification		
Deposit Account Nixon Peabody LLP	1812						
Name 141X011 418044 222		2.520	1812	2.520	For filing a request for ax parte reexamination		
The Commissioner is authorized to: (check all that apply)	1804	920*	-1804	920*	Requesting publication of SIR prior to Examiner action	- 1	
Charge fee(s) indicated below Credit any overpayments	1,805	1.840*	1805	1,840*	Requesting publication of SIR after Examiner		
	1251	120	2251	60	Extension for reply within first month		
Charge any additional fee(s)	1	120			· ·		
Charge fec(s) indicated below, except for the filing fee	1252 1253	450	2252	225	Extension for reply within second month 225.00		
to the above-identified deposit account.		1.020	2253	510	Extension for reply within third month		
PEE CALCULATION	1254	1.590	2254	795	Extension for reply within fourth month		
1. BASIC FILING FEE	1255	2,160	2255	1,080	Extension for reply within fifth month		
Large Entity Small Entity Fee Fee Fee Fee Description	1401	330	2401	165	Notice of Appeal		
Fee Fee Fee Fee Description Code (S) Code (S) Fee Paid	1402	330	2402	165	Filing a brief in support of an appeal		
	1403	290	2403	145	Request for oral hearing		
1001 790 2001 385 Utility filing fee	1451	1.510	1451	1,510	Petition to institute a public use proceeding		
1002 340 2002 170 Design filing fee	1452	110	2452	55	Petition to revive unavoidable		
1003 530 2003 265 Plant filing fee	1453	1.330	2453	665	Petition to revive unintentional		
1004 770 2004 385 Reissue filing fee	1501	1,330	2501	665	Utility issue fee (or reissue)		
1005 160 2005 80 Provisional filing fee	1502	480	2502	240	Design issue fee		
	1503	640	2503	320	Plant issue fee		
SUBTOTAL (1) (S) 0	1460	130	1460	130	Petitions to the Commissioner		
	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1806	180	1806	180	Submission of Information Disclosure Stmt		
Fea from		40	8021	40	Reconting each parent assignment per property		
Total Claims 6 -20** = 0 X = 0	1809	770	2809	38.5	(times number of properties) Filing a submission ufter final rejection (37 CFR 1.129(a))		
Independent 5 -9** = 0 X = 0	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))		
Multiple Dependent X = 0	1801	770	2801	385	Request for Continued Examination (RCE)		
Large Entity Small Eutity Fee Fee Fee <u>Fee Description</u>	1802	900	1802	900	Request for expedited examination of a design application		
Code (\$) Code (\$)	Other	fee (speci	ify)				
1202 18 2202 9 Claims in excess of 20							
1201 86 2201 43 Independent claims in excess of 3		wad har Br	neio Filie	g Fee Paid	SUBTOTAL (3) \$225.00		
1203 290 2203 145 Multiple dependent claim, if not paid	Redic	cou by is	1510 1 1111	g ice i an	SUBTOTAL (3) \$225.00		
1204 86 2204 43 ** Reissue independent claims over	1		CERT	TIFICATE (OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]		
original patent 1205 18 2205 9 ** Reissuc claims in excess of 20 and	1 he	eby centil			ndence is being:		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	deposited with the United States Postal Service on the date shown below with sufficient						
SUBTOTAL (2) (5) 0	postage us first class mail in an envelope addressed to: Mail Stop,						
**or number previously paid, if greater: For Reissues, see above	l	Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 Ba transmitted by facsimile on the date shown below to the United States Patent and					
	1	Trademark Office at (703) 703-872-9306					
		January 27, 2005 Jacques III VDC IV The					
		Date Signature Kathleen M. McManus					
	Typed or printed name						
SUBMITTED BY					Complete (If applicable)		
Davids Safran 4 0		tration N		27,997	(703) 827-8094		
Name (Print/Type)	- (Attor	qeyi/Iger		·	Telephone		
Signature Va 300					Date January 27, 2005		

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